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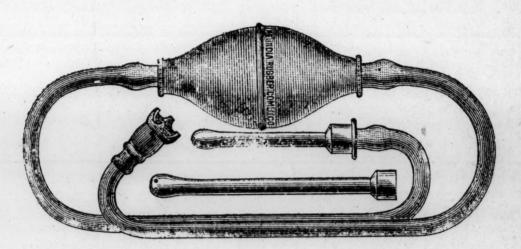
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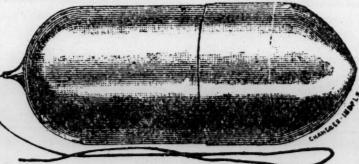
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THE

*CALIFORNIA*MEDICAL* JOURNAL.*

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Calopractic Surgery. (No. 7.) (Gr. kalos, beautiful, and prassein, to make.)

Lectures by Prof. Gere, California Medical College, Intermediate Course, '94.

Though it is seldom advisable to change the color of the hair, yet it may be well to know how, and in cases of spotted or banded hair, applications to produce uniformity in appearance may be desirable. To temporarily alter the color we may use stick cosmetics or powders which, though dirty, may be washed off and do no harm; but it may be considered certain that any agent producing a permanent pronounced change of color is decidedly injurious to the health or life of the hair and often to that of the individual owner as As I have said before, remedies that stimulate the nutrition of the hair like jaborandi, etc., will increase its coloring as well, hence it becomes gradually darker; but to color light or gray hair brown or black, dyes must be used, the basis of which is some metallic salt as lead or silver-most frequently the latter. It is true the prints are filled with advertisements of "vegetable hair dyes warranted perfectly harmless" but this, like most other advertising, is deliberate lying. I will give you the formula of "Ring's Vegetable Ambrosia" which formerly had and perhaps yet has a considerable reputation, so you may judge as to the average compound of that kind. It is as follows:

R

Plumbi acetatis (sugar of lead) - 3j
Lactis sulphuris (lac or milk of sulphur) 3jss
Spiritus myrciæ (bay rum)
Aquæ destillatæ (distilled or rain water) aa Oss
M Sig.—Apply to the hair as often as necessary.

The lead solutions are not so rapid nor permanent in their action as the silver neither do they burn the hair so badly, but they are more dangerous—many cases of poisoning in which the mind as well as the body has been injured, have been traced to their use. Silver is most commonly used and is most effective—a solution of the nitrate being applied which by exposure to the light soon changes to a black oxide, staining hair or skin brown or black according to the amount applied. There are many formulæ for silver solutions, but perhaps the best is known as "lightning hair dye", and is prepared as follows:

R.						
Acidi pyrogallici		-				3i
Alcoholis -		•			-	3] 3j
Aquæ destillatæ			•	•		3v
M Sig.—No. 1.						
R						
Argenti nitratis	Tax -	-			-	3j
Aquæ destillatæ			-	-		388
Solve et adde						
Aquæ ammoniæ	•	•			•	388
M Sig.—No. 2.						

The hair is cleansed, dried and No. 1 applied thoroughly (say with a tooth brush), when nearly but not quite dry apply carefully No. 2 (best with a fine comb or comb and tooth brush) avoiding the skin as much as possible. Should it get on the skin accidentally it may be removed, while recent, with a strong solution of hyposulphate of soda or iodide of

potash. Cyanide of potash is still more effective and often used, but is so deadly a poison that its use is not advisable except in professional hands. Barbers sometimes keep a third bottle in their set, containing one half ounce of sulphuret of potassium to one-half pint of water, marked No. 3 or "Stain remover"

On the other hand, to remove the color of dark hair, alkaline solutions as of ammonia or potash are used, or solutions of oxygen, notably the peroxide of hydrogen. The latter is most commonly used, and is sold under various names, (aureoline, etc.) for the purpose of bleaching dark hair to blonde. All these do more or less permanent injury to the hair, and my advice to anyone contemplating making a "bleached blonde" of him or herself is—DON'T.

The visible part of the external ear, (pinna, auricle or shell of the ear) commonly called the ear for short, is at present more ornamental than useful, though rudimentary muscles still remain attached to it which were formerly made use of in directing the auricle toward the source of suspicious sounds, but the free movement of the neck permits the head to be turned, ear and all, with more certainty, so special motion of the auricle is no longer required.

The ear presents more variety in its natural configuration than almost any other feature, and as if this were not enough savages are universally encouraged by its plasticity to pierce, stretch, alter and deform it. The curled edge—helix—and the lobule are the most ornamental portions of the ear and are not possessed by any of the lower animals, hence are something to be proud of. In the most perfect ears, the lobule is free and the ear does not project outwardly at its upper or back part, but is close to the head. Many children are deformed by the ignorance or carelessness of parents and nurses who allow them to wear their hair or head coverings in such a manner as to press the ear outward or even downward, causing "lop ears". As the ears consist chiefly of cartilage and skin they may be easily molded at an early age

in the direction of beauty or deformity, and may also be easily trimmed or shaped by the surgeon. Perhaps a band around the head over the ears at night may be sufficient. Even if a portion be missing it may be substituted by vulcanized rubber or celluloid. Perhaps the only excuse for earrings is when the lobule is deficient and needs elongating, but we can make a better shape by an incision separating it sufficiently from the adjacent structures and then stitching the edges of the skin neatly together so that it will not subsequently adhere. The rim may be trimmed when necessary or the curves of the cartilage increased or diminished as required by cutting through the skin on one surface, incising the cartilage and dressing with splints or molds of If the cartilage be absent, as is someappropriate shape. times the case in lop ears, freshen the inner surface of the upper posterior portion, also a corresponding surface on the side of the head, bring the raw surfaces in apposition and stitch the margins together.

The forehead should be smooth and vertical, or with a slight backward inclination—that of the adult male slopes more than those of women and children owing to the prominence of the brows produced by development of the frontal sinuses in the former—but all are modified by individual temperament. Those in whom the sanguine temperament predominates have the forehead straight and square, the bilious temperament low and sloping, the lymphatic round and smooth and the encephalic bulging. Cases of inherited struma or syphilis are likely to have frontal bosses. shape of the forehead can be modified in growing subjects as mentioned when speaking of the cranium as a whole. Apparent height of the forehead is due in a great measure to the extent of the implantation of the hair and can be increased if desired by epilation (hereafter to be described) or diminished, except in case of baldness, by the arrangement of the hair; the "bang" should not be abandoned by all ladies any more than it should be worn indiscriminately, fashion or no fashion.

Wrinkles of the skin covering the forehead, though perhaps inevitable in time, may be deferred by avoidance of frowning or elevating the eyebrows. I have observed well marked lines in young persons, caused by trouble, to entirely disappear on the advent of happier times. Our whole face indeed, is largely what we make it, and in this connection let me quote the testimony of Inspector Byrnes, of New York, who has had the greatest possible experience in physiognomical observations:

"If all men were savages—if they grew from infancy to manhood and old age with no artificial influences to bend their natures—physiognomy might be reduced to an exact science. I do not assert that it could, but admit that it might. In the complex civilization of to-day it never can be. For education modifies the lines of the face to a remarkable degree. The growth of intelligence imparts not only a new, softened expression to the face, but actually changes its appearance to an extent that will inevitably throw the rules of physiognomy into confusion. Not that a crooked nose may become straight, or a large mouth small; but wise habits and the desire to appear well in the world may erase the ugly, vice-born wrinkles about the eyes and on the forehead, and effect other changes of a similar nature."

If the wrinkles are caused by an excess of integument, as sometimes happens, a section of the skin may be removed, leaving but a single line in place of many folds; otherwise the methods to be hereafter mentioned when speaking of facial wrinkles may be utilized.

Eyebrows should be moderately heavy and slightly arched, corresponding very nearly to the curve of the upper edge of the orbit. Much of the apparent obliquity of Chinese eyes is owing to the outer end of the eyebrows being implanted considerably above the outer angle of the orbit. The carve, slant or general outline can be modified by plastic

operations on the skin, raising or depressing particular points or, if the hair is very thick, by removing a portion of it by electrolysis, or by changing the direction of the growth of the hair by trimming, brushing and application of pomatum or stick cosmetic. Heavy brows meeting in the middle or coming down to the root of the nose are ugly and should have the superfluous portion removed by the electric needle. The growth of the eyebrows, when scanty, may be stimulated by means heretofore described when speaking of the hair of the scalp remembering to brush always in an outward direction. Previous remarks in regard to changing the color of the hair will also apply to the eyebrows and to the eyelashes as well, which should be long and slightly curved. Inflammation of the eyelids often causes loss of the lashes or gives them a vicious direction so they impinge upon and scratch the eyeball. This trouble—trachoma—may remain after the disease of the eye is cured. If the offending cilia are but few in number they may be removed by electrolysis, but if many or all are involved a plastic operation on the lids or cartilage may be required, the details of which come within the domain of our Professor of Ophthalmology. A drop or two of Oil of Cajuput applied daily to the roots of the lashes with a camel's hair pencil is said to stimulate a healthy growth of the lashes and this may also be applied to the eyebrows if desired, in the latter case it should be well rubbed or brushed in-always in an outward direction.

Eclampsia.

BY E. H. MATTNER, M. D., SAN FRANCISCO, CAL.

The term eclampsia is used in a more restricted sense by some physicians than by others. It is employed in the following article to designate those convulsive seizures, clonic in their character, sometimes general, sometimes partial,

which affect the external muscles. Eclampsia is therefore synonymous with clonic convulsions. It consists in rapid, forcible, and involuntary muscular contraction, alternating with relaxation. Eclampsia occurs in a great variety of diseases, some of which are located in the cerebro-spinal system, some in other parts of the body, and some are constitutional. It may also be produced by temporary derangements of system, not sufficiently severe to be considered diseases, and by powerful mental impressions, those of an emotional nature, affecting the delicate and sensitive nervous system of the child.

Pathologists recognize there distinct forms of eclampsia. The term essential or idiopathic is used when the convulsions have no appreciable anatomical character, that is, where there is no apparent pathological state in the brain or elsewhere, which gives rise to the attack. For example, if a child die in convulsions from fright, and all the organs, including the brain, are found in their normal state, the eclampsia is called idiopathic or essential. If the cause be disease of the brain or spinal cord, it is termed symptomatic. If eclampsia arises from local disease elsewhere than in the cerebro-spinal axis, as from pneumonia, the term sympathetic is employed. But eclampsia may be at the same time sympathetic and symptomatic, as when it occurs in consequence of congestion of the brain, which is induced by severe and frequent paroxisms of whooping-cough.

Causes.—Eclampsia occurs at any period of infancy and childhood, but it is much more rare after the period of six or seven years than previously. Some children are more liable to it than others. It is produced in one by an agency which in another has no appreciable effect. There are some, generally those of an impressible nervous system who are seized with convulsions whenever there is any slight derangement in the digestive or other organs. The exciting causes of eclampsia are too numerous to be mentioned in full. It is a symptom in nearly all cerebral diseases. It is

produced in the nursling by changes in the milk. changes are usually due to violent emotions of the mother, as anger, fright or grief, to the use of acescent or indigestible food, or to derangement, temporary or permanent in Thus, I have had a case where the catamenia her health. so affected the milk that the infant was seized with eclampsia at each monthly period. In childhood the most common cause of clonic convulsions is the presence of some irritant in the prime viæ. All kinds of fruit even the mildest, may produce eclampsia, especially when eaten unripe and with the seeds or taken in undue quantity. Violent emotions of the child, worms, painful dentition are not infrequent causes. It is a common complication also of pertussis and pneumonia. Again it often occurs at the commencement of the eruptive fevers. In young children, fevers, even when not very severe, are apt to terminate suddenly in eclampsia, succeeded by coma and death. Such are the more common causes of eclampsia. It is seen that they are of two kinds, predisposing, and exciting. An excitable or impressible state of the nervous system constitutes the chief predisposition to the disease. Plethora, or its opposite state, anaemia, increases the liability to an attack.

Premonitroy stage.—In the majority of cases there are prodromic symptoms, which the experienced and careful physician can detect. The child is perhaps more or less drowsy and when disturbed, fretful. The eyes often have a wild or unnatural appearance; occasionally they are fixed for a moment on an object, and yet apparently without noticing it. The sleep is disturbed; in some there is unusual heat of head, and if old enough, complain of headache. At times, especially if the primary disease be febrile or inflammatory, there is incoherence of thought or expression, or even actual delirium. In some children, when eclampsia is threatening, the thumbs are seen to be carried often across the palms. I have often observed this especially during the convulsive cough of pertussis. A very important prognostic symptom

is sudden starting, or twisting of the limbs. This shows that the nervous system is profoundly impressed, and but slight additional excitation is required to develop eclampsia. This sudden starting not infrequently precedes the attack several hours, and gives sufficient forewarning. The prodromic symptoms are often disregarded by the parents who do not understand their significance. Even physicians, in the haste of their visits, in many instances do not notice The symptoms which precede symptomatic and sympathetic eclampsia are, moreover, blended with those of the primary affection, and hence another reason why they are apt to be overlooked. When the convulsions are about to commence, the child generally lies quiet; the eyes are open and fixed; often they are turned up. The face may be pale or flushed, or sometimes, especially in cerebral diseases, the features present patches or streaks of a flushed appearance, while around them the natural color is preserved. The duration of the prodromic stage is very different in different cases. It may last from a few minutes to several hours and even longer.

Symptoms.—Eclampsia is general or partial. If general, the muscles of the face, eyes, eyelids, and of all the limbs, are in a state of rapid involuntary contraction, alternating with relaxation. The features loose their natural expression and are distorted; the mouth is drawn out of shape, often to one side, by the violent muscular action; the teeth are pressed together by tonic contraction of the masseters, so as to sometimes lacerate the tongue. The eyelids are usually open, and in severe cases turned so that the pupils are lost under the upper eyelids, or the muscles of the eyes are involved in the spasmodic movements, so that the eyeballs are forcibly drawn from side to side. While the features are thus distorted, the head is strongly retracted or is turned to one side; the forearms are alternately pronated and supinated, the thumbs and fingers are convulsively flexed, so that the thumbs lie across the palms and are covered by the fingers; the great toe is adducted, the other toes flexed; and the toes, as well as legs, participate more or less in the spasmodic movements.

In general convulsions, consciousness is usually lost. The head is hot previously to and during the attack—at least in the first part of it—and the face flushed. In exceptional cases, especially in sympathetic eclampsia, the head is cool and the face pallid. The pulse is somewhat accelerated, as well as the respiration, and the latter is rendered irregular if the respiratory muscles, especially those of the larnyx, are involved, as they generally are. The sphincters are relaxed during the convulsive attack, so that in many cases the urine and stools are passed involuntarily.

Partial eclampsia is more common than the general form; it occurs in the muscles of the face and of one or both upper extremities on one side. Rarely, if ever, does eclampsia affect the legs without affecting also the muscles of the arms and face. In partial convulsive attacks, sensation and consciousness are in some patients not entirely lost. duration of an attack of eclampsia varies in different cases from a few minutes to several hours or even longer. Violent attacks are usually short. When the convulsion ends favorably, the spasmodic movements become less and less strong, and finally cease. The child then takes a deep inspiration, after which it lies quiet, and the respiration remains regular or moderately accelerated. Some fully recover in a few minutes if the convulsions have been light and the cause transient, and seem to experience no inconvenience except soreness of the muscles and fatigue. Others soon recover consciousness, and their temperature, respiration, and circulation become natural, but they remain dull for a time, their minds are bewildered, and perhaps unable to speak. few hours these untoward symptoms pass away. In essential, and in a large proportion of cases of sympathetic eclampsia, if properly treated, and if the cause be recognized and removed, there is no recurrence of the convulsions; with

others it is different. In many cases, especially of symptomatic eclampsia and of sympathetic, in which the cause is grave and persistent, the convulsions return after a variable period of a few minutes or a few hours. Six or eight or more convulsions may occur within twenty-four hours. Rarely, they occur several times daily for several consecutive days, but severe convulsions, repeated at short intervals for twenty-four or forty-eight hours, usually end in fatal congestion of the brain or nervous effusion. In these cases the convulsive movements cease, but there is no return of con-The child lies quiet, with pupils not readily sciousness. acted upon by light, and often somewhat dilated, gradually the limbs grow cold and the pulse feeble, and fatal coma supervenes. Death does not ordinarily occur from one There are several at intervals, during which the attack stupor is gradually becoming more and more profound, 'till finally, total loss of consciousness and sensation result, terminating in death. Apnœa may occur in the first attack, ending life abruptly and unexpectedly, but in other instances it does not result till after several seizures. Occasionally, when life is preserved, there is some permanent ill effect of eclampsia, and we may have drooping of the upper eyelid, strabismus, irregularity of the mouth. These accidents are consequences of essential as well as symptomatic convulsions.

Anatomical characters.—The morbid anatomy pertaining to eclampsia is in most cases twofold; first, the pathological states which precede and cause the convulsive movements; secondly, those which result from them. We have seen that in sympathetic eclampsia the diseases which sustain a causative relation are very numerous; some are constitutional, others local, and the latter may have their seat in almost any part of the economy, distinct from the cerebrospinal axis. In some cases of sympathetic eclampsia the immediate cause is too active a circulation, a state of hyperæmia of the cerebral vessels. It has already been stated

that this hyperæmia may be diagnosticated in young infants in whom the anterior fontanelle is open. Such infants seized with acute inflammation of the mucous surfaces or of the lungs, often present a full and rapid pulse and a convex and forcibly pulsating fontanelle before the eclamps a begins. In other cases of sympathetic eclampsia the primary disease induces passive congestion of the brain, and this in turn gives rise to convulsions. Eclampsia occuring during the paroxysms of whooping-cough affords an example. In the contagious diseases as measles, scarlet fever, eclampsia is doubtless often produced by the direct action of the specific virus on the cerebro-spinal system. In other cases of sympathetic eclampsia, the convulsive movements are produced by the primary disease acting directly on the nervous system, without causing any appreciable alternation in the state of the cerebro-spinal axis. The pathological state preceding symptomatic eclampsia differs in different The immediate cause of this form of eclampsia may be active or passive cerebral congestion, with or without effusion; it may be compression of the brain from various causes; it may be a deficiency as well as an excess of the cerebro-spinal fluid. Again, eclampsia, especially when severe and protracted, and when occuring in successive attacks, may be the cause of certain lesions. The congestion resulting from eclampsia may give rise to extravasation of blood and the formation of a clot. If this occurs, there is often more or less paralysis on one side.

Diagnosis.—The only disease for which there is danger of mistaking eclampsia is epilepsy, but the diagnosis can ordinarily be made by recollecting the following facts: Eclampsia is most common in infancy. If it occurs after the age of three years there is some manifest exciting cause, which renders the child seriously sick independently of the convulsions, and prior also to their occurrence. On the other hand, epilepsy rarely occurs before the age of three years. The first attacks of it are often very mild, they occur with

no previous or co-existing sickness, and with little or no warning. It is oftentimes difficult to ascertain the form of eclampsia whether essential, symptomatic, or sympatheticin other words, to determine the cause—till after the convulsions cease. This is especially true when, as is frequently the case, the physician is not summoned till the convulsive movements begin, and it is necessary that he should act promptly, with but little knowledge of the childs previous history. If there be an obvious antecedent disease, as whooping-cough or meningitis, the cause is apparent, but if the prevous health has been good, or but slightly disturbed, it may be necessary to make more than one visit to ascertain the seat and character of the cause. In the majority of cases of convulsions occurring suddenly in a state of previous good health, the cause is seated in the intestines, but sudden and unexpected attacks may be due to the commencement of some inflammatory affection. Unless the eclampsia be speedily fatal, the physician, will, in most cases, soon be able to ascertain the nature of the cause, and diagnosticate the form of the disease.

Prognosis.—Symptomatic eclampsia is always serious. it occurs in the course of a cerebral disease, it indicates the approach of death, but if at the commencement some may recover. In idiopathic or essential convulsions the prognosis depends on the severity of the attack, and on the age, strength, and previous condition of the child. If there be pre-disposing or co-operating causes, as a nervous or excitable temperament, or dentition, the prognosis would be less favorable than when such are absent. In sympathetic eclampsia the prognosis varies greatly, according to the nature of the primary disease, and often according to the stage of that disease. If convulsions occur at the commencement of an eruptive fever, they generally subside without outward symptoms, and the fever pursues a favor-Eclampsia, after the appearance of the able course. eruption, is premonitory of a fatal result. I have not yet known a patient with scarlet-fever recover who had convulsions after the rash had covered the body. The prognosis in eclampsia is more favorable if the parallelism of the eyes be retained, the pupils remain sensitive to light, and consciousness soon returns. A fatal termination may be predicted, if, after the convulsions, the child remains stupid, without any evidence of returning consciousness, and the pupils do not respond to light.

Treatment.—Fortunately, in as much as the physician is often required to treat eclampsia in ignorance of the cause. the same measures are demanded, to a considerable extent, in all cases, whether the form be essential, symptomatic, or sympathetic. As early as possible in the attack the feet should be placed in hot mustard water, or, if it can be procured with little delay, a general warm bath may be used in place. This has a soothing effect upon the nervous system and promotes muscular relaxation, while it also produces deviation of blood from the cerebro-spinal axis. It is therefore, useful, especially in those cases in which active or passive congestion precedes the eclampsia; it is also useful as a preventive of passive congestion and consequent œdema of the brain, lungs, and other organs, which are the most serious results of eclampsia. It should be continued from six to fifteen or twenty minutes according, to the severity and duration of the attack; at the same time cold applications should be made to the head, until the temperature which is usually increased, is reduced. Cold thus employed acts promptly in contracting the vessels of the brain and meninges, and diminishing the cerebral conges-It tends, therefore, to remove one of the chief dan-Cold applications are also useful for reducing an gers. elevated temperature if it be present. In most cases of eclampsia, if the temperature reach 103°, the necessity for its reduction is urgent, and the cold applications should be resorted to. As a large proportion of convulsive attacks originate in the condition of the intestines, either solely or part, it is advisable to prescribe an aperient unless there be previous diarrhoea. If symptoms indicate intestinal inflammation the milder purgatives, such as castor oil is prefer-If the recent ingesta consist of fruit or of substances of an indigestible character, an emetic is appropriate, a teaspoonful of the syrup of ipecacuanha, repeated if necessary in fifteen or twenty minutes may be given. If dentition seems to be an important factor in the cerebral disturbance, it may be necessary to lance the gums. During the convulsions but little can be done with remedies, nor is there suitable opportunity to select carefully. The inhalation of chloroform or a few drops of amyl nitre seems to cut short the paroxysm, being careful however, to watch pulse and respiration. Also the use of chloral hydrate per rectum is indicated during the attack. If we have a high temperature, head hot, an enema of five or six ounces of cold water with a teaspoonful of tincture of lobelia may be given. The clothing should be loosened, and the child kept in as comfortable position as possible. In addition to the local measures mentioned above we have agents which will relieve and correct the tendency to convulsions and one of the best remedies is the bromide of ammonium. I usually prescribe:

R

Ammonii Bromidi - - - zij Aquæ et Glycerini - - ad ziv

M Sig. —A teaspoonful as often as may be required.

Gelseminum, this remedy is especially useful during dentition, this may also be combined with the bromide of ammonium. Passiflora inc. is a good remedy where there is excessive irritability and nervous excitement. Belladonna, where there is much congestion of the cerebro-spinal centers, intolerance of light and dilated pupils. Another very good remedy is the monobromide of camphor which is particularly indicated in cases where there is a condition of cerebral anæmia as in cholera infantum, given in one grain doses every



hour. The utmost care should be enjoined in reference to the hygienic management of those who are subject to eclampsia. The diet should be nutritious, but bland, and all causes of excitement be studiously avoided.

Stirpiculture (No. 3).

By H. MICHENER, M, D., HALSEY, ORE.

When the death rate among children under five years of age, in the large cities, is considered and it is learned that it is nearly 50 per cent, the fact is startling. While the death rate among the same class of children in the country is not so large, yet it is sufficiently great to be appalling.

No stock-breeder would sustain such a fearful rate of loss among his stock without a thorough investigation of the cause, nor could he long continue in his business unless he should take such precautions and methods in his breeding, as well as in subsequent care, as would conduce to a hardier, healthier breed.

Now is the human animal less hardy than the brute? If so, there is surely something wrong that requires our attention. As a general rule, among the lower animals, the duration of life is usually five times the length of its period of growth. If this be true, and assuming that man arrives at full maturi y at twenty years of age, he should then live to a full century. But few reach that age and the Biblical age of three score and ten is too great for the vast majority of mankind. It is evident therefore that there is a wrong which needs to be corrected. Death should come by reason of age, by completion of full maturity and use, and not by disease in infancy.

It is not to be understood that the high death-rate among infants is to be attributed entirely as a result of the hereditary transmission of constitutional vices for such is not the

case. Lack of proper sanitation, improper food, neglect of all the common rules of health tend to increase the rate. Yet we find the death-rate among the children of the well-to-do-classes alarmingly great although they are supposed to have the necessary care and the proper environments condusive to health. Hence, we must look further for another cause, and it will be found probably in *incompatibility* of temperaments.

It remained for one of the "Fathers of Eclecticism", Prof. Byrd Powell, to discover, if discovery it be, the relation of the temperaments to procreation.

Prof. Powell recognized four temperaments, viz., bilious, sanguine, encephalic, and lymphatic. These he classified as primary and secondary. The first two, or primary temperaments, he found native to primitive man as exemplified in the Indians. The secondary temperaments, encephalic and lymphatic, he found to be adjunctive, being results of civilization. He further held that life centered in the primary. He therefore designated them the vital temperaments, and as life could not originate in the secondary, or adjunctive, he called them the non-vital temperaments. But he also found that as a result of civilization that the non-vital temperaments were necessary to procreation although not necessary to man in the wild state.

In his Natural History of the Human Temperaments he gives the following rules as governing marriage and its results:

Rule I.—In all physiological marriages the sum of the temperaments should be not less than one-third nor more than one-half non-vital in order to produce the best results.

Rule II.—When the constitutional similitude of the parties to a marriage is such that there is no appreciable difference, sterility will be the result.

Rule III.—When the constitutional similitude is less than complete, or is appreciably different, the progeny will be still-born, imbecile, scrofulous, deaf, blind, or otherwise imper-

fect. Here the difference is less than one-third, and the results are not the best—a violation of Rule I.

Rule IV.—When both parties possess an adjunctive element in the same degree, they are incompatible. The progeny, if there be any, will not be viable.

Rule V.—When one party is of the bilious temperament combined with the lymphatic, and the other is sanguine combined with both the bilious and encephalic, their children all die young of tubercular consumption of the lungs, or of the abdominal glands, although neither of these forms of disease were in the ancestry of either party.

Rule VI.—When both parties to a marriage have the bilious and encephalic temperaments combined, their children will be idiotic. (If the parents had the two temperaments evenly balanced there would be progeny according to Rule II, but the above applies to cases under Rule III.)

Rule VII.—If one party be bilious and encephalic, and the other sanguine, encephalic, bilious and lymphatic, (a combination of the four temperaments) the children will sooner or later become insane.

In order that the best results may be produced he gives the two following rules for the mating of parents:

Rule VIII.—One of the parties must be exclusively vital, that is, must be either sanguine, bilious, or sanguine-bilious, (a combination of the two vital temperaments) and the other parent must as certainly be more or less non-vital, that is, more or less lymphatic or encephalic. The results will be vicious in proportion to the degree of violation of the above rule.

Rule IX.—The greatest dissimilitude of constitution of two parties of the same species is that of vital and non-vital temperaments and this is the most favorable to progeny.

Professor Powell cites numerous examples illustrative of the above rules or laws but as to the absolute accuracy of his conclusions I cannot affirm, since my own observation has been comparatively limited, for my attention was not drawn to this phase of the question until the last year or two, but I am constrained to say that so far as my observation has gone and with my limited ability in the study of the temperaments, I believe there is much truth in Professor Powell's rules.

At present it is difficult to find a person who is purely vital or non-vital. Our careless method of mating has so blended the temperaments in the offspring that the four are often found combined in the same individual although varying in degree or intensity.

If insanity can be lessened one-half or even one-fourth by observation of Rule VII, or if other vicious qualities may be lessened in like proportion by observance of Powell's teaching, is it not time that cognizance was taken thereof and our marriage laws so regulated that "physiologically incestuous" marriages could not occur?

The Spartans during the time of Lycurgus paid great attention to the development of its soldiery, and as every male citizen had to serve in the army after reaching manhood until sixty years of age, those qualities requisite to a hardy and valorous soldier were much prized and cultivated. The weak and infirm were destroyed; infants, male or female, who were deformed were not permitted to live. All others were exposed to such rigorous training and hardships that only the most vigorous could survive. By this method of enforced selection of the most hardy they thereby developed a State whose army was invincible. But the cultivation of the physical or brute powers only and the neglect of the mental and spiritual qualities eventually proved the weakness of Sparta.

A State at present could not follow such a method of ridding itself of the deformed, weakly, and infirm citizens as was followed by Sparta and neither would it be right, for it is the duty of society to give all aid possible to the physically and mentally unfortunates we have in our midst, but it does not follow that we should aid in their propagation. On the contrary, it is the imperative duty of society to suppress the further propagation of the physically and mentally handicapped classes.

Prohibiting marriage between occupants of eleemosynary institutions, and between those physically or mentally unfortunate or attainted would be a long step toward the abolition of poverty, for as we lessen disease we decrease one of the prime causes of poverty. If the propagation of incapables is prevented a burden is removed from the shoulders of the tax-payers.

Criminals usually marry or cohabit with parties of their class and thereby a progeny is bred in whom the criminal instincts are highly developed. Here the state should make use of the surgeon's knife. If in all convictions for crime castration was certain it would not only prevent propagation but it would have a deterring effect upon those just entering a criminal life. A few years would see our jails and penitentiaries with but comparatively few inmates.

Marriage should be a privilege granted by the state to those who have shown themselves capable of supporting a family under ordinary conditions, provided the applicants have been recommended by a board of examiners whose duty it should be not only to consider their present mental, physical and moral condition, but all hereditary tendencies toward evils or diseases; also their temperamental compatibility should be considered.

It also should be the duty of every physician to instruct such of his patrons who are unfit for parentage of certain and harmless contraceptics or methods of preventing conception.

Some will object that if such information be furnished it will be taken advantage of by the unmarried to enjoy those pleasures which should be strictly post-nuptial and to avoid the illegitimate fruits thereof—the objectors holding that it is the fear of the consequences of illicit intercourse that restrains many of the unmarried. Probably it would be abused. But it must be remembered that those whose passions are so strong that they are led to cast all moral principles aside, beget offspring of like strong passions. Like begets like. I knew a young woman whose great-grandmother,

grand-mother, mother and herself were bastards, and she herself gave birth to a bastard—five generations of illegitimates! Now if the first in the line of illegitimacy had used a contraceptic a long line of evil progeny would have been prevented.

If we look at the number of feticides that occur, and the number that come to the knowledge of the public is but a small percentage of the number committed, as we seldom learn of one except where the death of the mother results from the crime—a crime committed against an innocent and inoffensive object—a crime which, if the mother survives, often gives her a long train of suffering as a punishment. Which of the two, prevention or abortion, is the better? Or if it is a preferable way to state it, which is the worse? And as will be shown in a subsequent paper, a mother who seriously considers committing feticide, or attempts it ineffectually, impresses murderous tendencies upon the mind of the child.

Would it not be better to leave virtue to the choice of the young men and women who were well conceived, wisely gestated, morally trained and untrammelled by the hereditary impulses of animal ancestors, with contraceptics freely available to them, or would it be better to leave those unfortunates who impulsively yield to their passions, which are the heritages from libertine parents, to suffer the shame and to bear the contumely of society alone while their betrayers go free? Again, the worry and mental anguish of a mother while gestating an illegitimate offspring cannot but have an injurious effect upon the mental development of the child.

There is also another good effect to be expected from the knowledge and proper use of contraceptics. A well-mated pair under certain conditions might not be able to beget a perfect child to-day, yet to-morrow, the next day, or next year everything may be favorable to a happy conception. It is the happy and intentional conceptions that should always occur and a knowledge of the science of stirpiculture, including a knowledge of contraceptics, makes such a conception possible.

A Case of Atrophia Maculosa et Striata.

BY A. W. TRAVERSE, M. D., SAN FRANCISCO, CAL.

Mrs. L—, American, twenty-four years of age, a blonde, asthenic, the adynamia existing since premature birth, consulted me in regard to her condition October 18th, 1893.

In endeavoring to elicit a history of the idiopathic atrophic condition the patient stated that she was unable to furnish any definite information regarding the time of its incipiency, but that she first noticed the streaks when about twenty years of age or two years before marriage.

The regions implicated are the buttocks, crests of the ilia, upper half of the thighs and abdomen. Here the pathological abnormality is shown in multiple, dead-white, or white with a delicate blending of a purplish tint, smooth, glistening atrophic striæ, much resembling the lineæ albicantes seen over the region of the abdomen in women who have conducted a first pregnancy through full term. In passing the fingers gently and carefully over the involved areas, these cicatriform streaks are found to be very slightly depressed below and thinner than the adjoining integument on the nates and abdomen, but over the iliac crests a few are even with the surrounding surface. Their general tendency is to follow the long axis of the body in their linear extension over its surface in parallel lines, while on the thighs their general course is in an oblique direction, but often crossing each other forming delicately traced reticula, and in all regions often following the natural lines of the skin. is marked by a single stripe four inches in length, extending in a transverse direction half way between the umbilicus and symphysus pubis.

These shallow furrows are arranged in various gentle curves and waves as well as nearly straight lines, and vary from half an inch to four inches in length the average being about one inch. In width they vary from a thirty-second to a sixteenth of an inch.

Their development is insidious and existence when once formed permanent. On first appearing these striæ are rosy or purplish in color, but whiten as they become older. The skin covering them is unimpaired in acuteness of sensation. In some cases of this affection there also occur atrophic macular patches, but in this case only a single minature oval spot was found above the right iliac crest. This like the striæ is also smooth, shining and white.

There are no subjective sensations attendant on this atrophic condition.

The etiology of these atrophic striæ rests in obscurity. They occur in both sexes, and at all ages. In some cases, especially in the young, the condition follows some severe systemic disease, as typhus or typhoid fever, yet no cause and effect relation can be traced from the one to the other.

Schultze's theory is that they are caused by the distension and stretching the skin is subjected to by the rapid growth and enlargement of the pelvis, but this does not account for the macular patches, or the striæ following systemic illness, or those occurring on the neck or extremities, or abdomen of virgin females. The tropho-neurotic theory has also been advanced for its explanation, but this does not cover the many cases of atrophic striæ found where the entire nervous system appears to be perfectly sound. As above stated we are obliged to confess our inability to furnish any satisfactory single cause that operates under all conditions.

The pathology and morbid anatomy of atrophia maculosa et striata has been studied by Kaposi, who excised a small piece of skin implicated by this linear atrophy from the left thigh of one of the patients in his Vienna clinic. He found by microscopical examination that the epidermis was greatly atrophied, the papillary layer of the corium almost obliterated, and a diminution of the glands, vessels, hair follicles, and fat cells, the latter to such an extent that only a few were left. The connective and elastic tissue were also found greatly diminished in substance. Jadassohn of Preslau, in a sim-

lar examination corroborates the fact of the atrophy and loss of most of the fibers of the elastic tissue, and attributes the effect primarily to an inflammatory cause. Langer believes the condition a spurious atrophy, resulting from a disarrangment of the connective tissue elements. Troisier and Menetrier in their examinations of specimens of this striated skin tissue failed to find any evidence of true atrophy, but discovered the elastic fibers torn through and curled up at their severed extremities. We thus see that these eminent histological researchers fail to agree as to the pathological state found in this atrophic condition, and their discordant views would seem to point to a multiplicity of causative factors working to produce these diverse anomalous states.

In regard to a diagnosis of atrophia maculosa et striata, its lesions must be differentiated from those of morphœa, syphilis and other diseases capable of leaving atrophic sequellæ. Here a history of the case will come to our aid, but where precedent hyperæmia, marked pigmentation, or a telangiectasis were present, especially in the macular variety, the differentiation of this disease from morphæa causes some difficulty. Atrophia maculosa et striata is much more inclined to be symmetrical however, while morphæa is usually asymmetrical in distribution.

Without entering into a history of the case, the idiopathic is indistinguishable from the symptomatic variety; the picture presented to the eye being the same in both forms. Microscopical examination does not aid us here either, as the pathological condition is similar in the two forms.

The prognosis in cases of these atrophic striæ as regards the general health is good, as the condition causes no inconvenience and may exist for some time before the patient is aware of the fact, but the atrophied condition itself is indelibly persistent.

Treatment in this form of atrophy is totally ineffectual, as no remedial measures can induce the skin tissue to assume its normal composition and appearance. As this slight deformity is generally on parts that remain covered, and furthermore cause no uneasiness, their possessors seldom seek the aid of the physician with a view of eradicating it, so that the lesions are found during such times that the patients seek help for other diseases that entail some degree of suffering.

Uterine Polypus. - Thuja in Eczema.

BY Q. A. R. HOLTON, M. D., NUEVO, CAL,

On May 20th, 1894, I was called to attend Mrs. R-, for what seemed to be a case of abortion. One month previous to this time she had missed her regular flow. I found her with regular pains and quite considerable hemorrhage. Examination revealed the os a little dilated and filled with what felt like placenta. I at once decided that it was a case of abortion, that it would soon be over and that it was a case of placenta previa, and so announced to my patient and her husband. But the pains which had begun to flag before my arrival seemed to nearly stop before I had been in the room Ergot was given to increase these which it did but to An attempt to introduce my finger into the womb and dislodge the contents failed for want of sufficient dila-A little of the presenting substance scraped off and tation. brought out with my finger nail confirmed me in the belief that it was placenta. Quinine was tried which also started up the pains but only temporarily. Hemorrhage ceased and my patient said she felt decidedly better. The os would not dilate and the pains stopped. I left her ergot and quinine, and went away directing them to call me when necessary. In a few days she was up and feeling nearly as well as usual, She continued thus for the next and went about her work. five months, menstruating regularly, doing her housework, etc.

On October 13th, I was called in haste at night to see her. The symptoms were the same as before only more severe; there was hemorrhage almost to syncope. Examination revealed the same substance in the os, but this time there was sufficient dilation to admit two fingers. I pushed past the impediment and traced it to the fundus. Without much delay I detached it and removed it as best I could with my finger nails and brought it away—a soft, fragile polypus, three inches long, pointed at the lower end and one inch thick. Hemorrhage and pain ceased at once; the uterus contracted.

To prevent a recurrence I injected once every two days a little tinct. thuja, a fifty per cent solution at first, afterward full strength. In a week she was up and has now, Nov. 14th, about recovered her strength and usual vigor. She is the mother of three children, the youngest of whom is about two years old. In case of recurrence what is the best treatment?

Thuja in Eczema.—A lady of 30 came to me with an eczematous sore on the lower lobe of the ear. It had never been well since she had her ears pierced to admit earrings when a little girl. In the last few years it had grown worse and various doctors and remedies had failed to effect a cure. It was much enlarged, hard, red, and covered with a brown scab which peeled off occasionally, quite sore, unsightly, and annoying. Tinct. thuja applied twice a day cured it in a few weeks.

Thuja also gave prompt relief in two cases of pruritus ani. It has given good satisfaction in a few cases of gonorrhœa both as an injection and internally as follows:

Tr. Thuja - - - - - - - - - - - - 3ii Aquæ q. s. - - - - ad. 3ii

M Sig.—A teaspoonful twice a day. As an injection about one-half the above strength.

Just So!

BY I. E. LAYTON, SOLOMON CITY, KANSAS.

I cannot help but admire and even comment upon Dr. Joseph West's article upon Apis Mel. in the November number of Our Journal, as it brings fresh to mind some of my own experiences, of many years ago, when I took everything "for granted" that some M. D. would write; especially, if I found he was some well known author of books. I am not inclined to do so now. It is only when I find by actual and long experience that a certain medicine produces certain effects, or none, as the case may be, that I then make note of that fact, independent of what a dispensary or able writer may say. I can say therefore that no one is authority for me unless my experience coincides with theirs. I have had like results to Dr. West from the use of remedies based upon the authority of others; sulphite of soda, for instance, Prof. Scudder tells us, and he is good authority, will act very efficiently in cases with pasty tongue, want of alkalies, Well, I have tried it, many times, and it everlastingly failed every time; only once could I see a little good from it, and that was in a case of diphtheria, where I believe its action was O. K.

Now it might be possible that under certain conditions in the case of certain peculiar constitutions that Ap s Mel., the sulphites, or other medicines might have quite a different action from the ordinary; for we well know that even the sting of a bee does not effect all alike.

I am willing to give due regard to what others may write, but do wish that physicians would make it a rule in writing not to suppose too many things, for I am certain that some M. D's. in writing for medical papers, giving their treatment of certain cases, do sometimes vary their writing from what

they actually did in the case, supposing such treatment would be all right and sanctioned by the readers.

Don't do that gentlemen. Tell your experience even if it is a blunder.

His First Case.

The town of Jamesville was a prosperous mining town with only one doctor until the arrival of Paul Smythe, M. D., a young and ambitious graduate with a large diploma. After having waited three months, the first case came along, the confinement of Mrs. M——, the old doctor refused to attend, never having received any fee for previous services. Dr. Smythe was called and delivered Mrs. M. of a fine boy. A friend who knew of the case met the doctor a day later and said, well Doc how is your case getting along? The doctor replied, "Oh, very well, the child is dead and the mother dying, but I think I can save the father."

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*CALIFORNIA*MEDICAL* JOURNAL.*

The Board of Examiners of the Eclectic Medical Society of California, will meet throughout the year regularly at 4 o'clock P. M. on the second Thursday of each month, at the office of Geo. G. Gere, M. D., Secretary, 412½ Post Street, San Francisco.

Miscellaneous.

Therapeutic Notes.

BY H. T. WEBSTER, M. D.

The present microbe scare is probably the most absurd delusion, on an average, that the history of medicine has ever afforded. While the theory doubtless contains some tenable propositions, and while contagious and infectious diseases may depend upon microbes for their active agencies of propagation, there is much nonsense about it, and it seems that the dividing line between sense and nonsense—between the sublime and the ridiculous—is difficult to discover.

A paragraph in a recent medical publication devoted to bacteria in bread, warns against the slicing of the loaf until immediately before eating, as the exposed surface of the slice is a ready place for the lodgement of bacteria. And now it is stated, whether as a matter of fact or as a joke on the infatuated disciples of bacteriology seems some question, that in eastern Europe an anti-shaking-hands society has been established, the ostensible purpose being that of pre-

venting the swapping of bacteria during the act. The question arises, with so many dangers from bacteria to face, how does it happen that any of us are alive at all?

Avena Sativa in Spermatorrhoea.—Inasmuch as so few realize the value of this remedy, I call attention to it again. We have no single agent so reliable in permanently arresting the manifestations of spermatorrhoea and permanently curing them as this. It is especially adapted to the nervous element of the disease, however, and may often be combined with advantage with other remedies adapted to the furthering of the same purposes.

In spermatorrhoea arising during prostrating diseases, as is sometimes the case, or as a sequellæ of such cases, during convalescence, avena sativa is a remarkable remedy in its effects. I find the specific medicine equal to any other preparation in the market, if not better. The dose may be ten or fifteen drops, three or four times a day.

Phenacetin as a Topical Application.—Though phenacetin has been recommended principally on account of its value as an internal remedy, it possesses valuable uses as a local agent which cannot be profitably overlooked. Powdered phenacetin is an excellent dressing for ulcers, both of traumatic and venereal character, and rapidly promotes healing, relieving at the same time pain and sensitiveness. I have used it in the treatment of stubborn chancroids with flattering success. Lately, it has been recommended as a local application to rheumatic joints, to sprains, contusions, etc., dissolved in diluted alcohol or incorporated in vaseline. It is used in the strength of fifteen to twenty grains of phenacetin to two ounces of diluted alcohol, which may be applied on cloths as hot as can be borne; or in lanolin, fifteen or twenty grains to the drachm of the fat.

Blatta, or Lentalis in the Treatment of Asthma.

—This agent is not a toothsome one to contemplate, it being the Russian cockroach. However, the homeopaths are active investigators of animal secretions and substances as

remedies, and they assert that this one is a sovereign cure for asthma. We hear of good and reliable remedies for this purpose often, but hardly realize the fulfillment of the promises of those who introduce them. Possibly we will find the same experience as regards this one. However, recent writers report very positive effects in old and stubborn cases, and it might be well to investigate, where urgent need of a remedy of this character was present.

Beletus Laricis in Persistent Remittent Fever.

—Dr. Wm. S. Gibson (E. M. Journal) uses from two to four drops of the specific medicine of this scent in remittents of stubborn character with very satisfactory results. He repeats the dose every two hours until the disease is arrested.

Change of Time

The Board of Trustees has deemed it advisable to conform in the time of holding sessions with Eastern Medical Colleges and our own Schools and Universities. The session of 1895 opens January 14th, 1895, and continues six months.

Future yearly sessions will begin in October and continue eight months.

Commencement Exercises.

The Sixteenth Annual Commencement Exercises of the California Medical College were held in the Metropolitan Temple, Wednesday Evening, November 21st. The hall had been gaily decorated for the occasion with flags and bunting and above the stage one read:

'94 CALIFORNIA MEDICAL COLLEGE

ECLECTIC

THE AMERICAN SCHOOL.

Long before the time stated on the program, the house began to rapidly fill and soon a vast assembly had gathered to witness the closing exercises of the term. The program was as follows:

tol	lows:
	President of the Evening
	PROF. C. N. MILLER, M. D.
1	OVERTURE, "Gems from Offenbach - Tobani
2	INVOCATION
	REV. JOHN HEMPHILL, D. D.
3	PICCOLO SOLO, "I Masnaderi" Tild
	MR. A. LOGAR
	Of the Royal Hungarian Orchestra
4	ADDRESS ON BEHALF OF THE FACULTY -
	PROF. J. W. HAMILTON, M. D.
5	VOCAL SOLO, "Pace, Pace, mio Dio!" - Verdi
	MISS GLADYS M. WORDEN.
6	CONFERRING DEGREES
	By PROF. D. MACLEAN, M. D., President
7	CORNET SOLO, "Grand Fantasia" - Rollins on
	MISS NELLIE SHIPLEY
	Accompanist Mr. F. Argall
8	COMMENCEMENT ADDRESS, "The Outlook"
	SENATOR BURKE, Santa Cruz
9	BARITONE SOLO, "The Gallant Tar" D. Braham
	MR. J. C. HUGHES
10	BENEDICTION
	REV. JOHN HEMPHILL, D. D,
11	AU REVOIR "Auld Lang Syne,"

ORCHESTRA.

Professor Hamilton on behalf of the faculty spoke with his wonted eloquence saying in substance:-

Few doubt that the world has grown better. But the question arises, how? Every reform has been brought about by revolt as is seen in the history of nations. also, in the advancement of the science of medicine a revolt against the old-established routine practice became neces-

In Germany that reform was brought about through the efforts of Hahnemann. In our own country by the early pioneers of the Eclectic school, Beach and Thompson and later by the untiring efforts and life-long devotion of Drs.

King and Scudder.

Our school is, therefore, of American origin. Briefly outlining the Eclectic method of the treatment of disease, Prof. Hamilton pointed to the rapid growth of the Eclectic school of medicine which only dates its birth from 1832 and now has colleges in most of the principal states of the Union. Then turning to the graduating class, he said, "we have no Hippocratic oath to administer to you to-night, it is our only requirement that you conduct yourselves in the future as you have done in the past, as ladies and gentlemen."

After the rendering of the vocal solo by Miss Gladys M. Worden, upon the presentation to the faculty and Board of Trustees by Prof. C. N. Miller of the candidates who had successfully completed the college curriculum, Prof. D. Maclean, President of the Board, with a few appropriate words, conferred the degree of Doctor of Medicine upon the following persons:—

NORMAN M. AVERY, M. D. OAKLAND, CAL. J. CARD BAINBRIDGE SAN FRANCISCO JOHN BALL BIRMINGHAM, ENG. NEW YORK. JOHN B. BURNS J. BRUCE CLIFFORD, Ph. D. OXFORD, ENG. CHARLES G. GEORGE REDDING, CAL. MARYSVILLE, CAL. HARRY LOUIS HAMILTON GEORGE W. HARVEY PEBBLE, CAL. WILLIAM H. HENDERSON CHICO, CAL. GUSTAV HENRICKSON NEVADA. STOCKTON, CAL. LE ROY F. HERRICK, M. D. SAN RAFAEL, CAL. OLIVER L. JONES, M. D. EDWARD HILLS LAKE ALAMEDA, CAL. ADELAIDE, SOUTH AUS. ERNEST H. MATTNER. M. D. AGNES McCRAITH SAN FRANCISCO. HENRY E. PASTOR BERKELEY, CAL OAKLAND, CAL. JOHN PURVES, JR. Los Angeles, Cal. LIT M. E. RAYMOND WILLIAM D. F. WARD TIDNISH, NOVA SCOTIA. IRA A. WHEELER Brookfield, N. Y.

After the audience had been entertained by some skillful execution on the cornet by Miss Nellie Shipley, the speaker of the evening, Senator Burke of Santa Cruz, was introduced

to speak upon the subject of the "Outlook". Prefacing his remarks with, "it is not my purpose, to-night, to speak of the 'outlook' of medicine, of law or even of the Democratic party east of the Rockies but of the 'outlook' for ourselves," the Senator in a logical and forceful discourse eloquently set forth his optimistic views with regard to the future of man.

There are, he says, two seemingly, diametrically opposed laws operating for the good of mankind. The one makes itself manifest in selfishness, the other in unselfishness. Examples in nature are numerous. An illustration of the working of these two laws is seen in the growth of a tree. Its efforts are first all nutritive and setf-preservative, but afterward reproductive, looking to the perpetuation of the species.

Darwin recognized the first law in his "Origin of Species." The higher forms of life impinge upon the lower. Nutrition implies selfishness. It remained, however, for Henry Drummond to point out the operation of the second law. The division of the protoplasmic cell tells the scientist that reproduction has begun. Here is inaugurated a struggle not for itself but for others. Reproduction implies unselfishness.

The reconciliation of these two laws manifests itself in philanthropy, liberality, humanitarianism, etc. It has abolished slavery. It demands the utmost freedom of action. It is opposed to privileged classes in medicine, (applause) religion or society. "Grand and noble is the outlook for man even as the Great Architect decreed it should be."

The exercises were concluded by the accomplished baritone soloist Mr. J. C. Hughes who received a hearty encore and the audience was dismissed to the tune of "Auld Lang Syne" by the orchestra.

Please mention this Journal when addressing our advertisers.

The State Meeting.

The Eclectic Medical Society of the State of California held its annual meeting in College Hall, Wednesday and Thursday, November 21st and 22nd.

The meeting was called to order by the president, Dr. H. B. Mehrmann of Oakland. To the roll call by the secretary, the following members answered to their names: Dr. A. W. Bixby, Watsonville; Dr. J. B. Baker, Soquel; Dr. B. T. Cockerill, Bloomfield; Dr. C. L. Cook, San Francisco; Dr. W. B. Church, Oakland; Dr. F. Cornwall, San Francisco; Dr. V. A. Derrick, Oakland; Dr. C. Z. Ellis, San Francisco; Dr. N. C. Field, Downieville; Dr. John Fearn, Oakland; Dr. J. F. Farrar, Berkeley; Dr. J. C. Farmer, San Francisco; Dr. J. R. Fearn, Oakland; Dr. G. G. Gere, San Francisco; Dr. J. R. Goodale, San Francisco; Dr. George Gunn, San Francisco; Dr. C. H. Hervey, San Jose; Dr. L. F. Herrick, San Francisco; Dr. Frank Huckins, Napa; Dr. J. W. Hunsaker, San Francisco; Dr. Will Hervey, San Jose; Dr. W. A. Harvey, San Francisco; Dr. J. W. Huckins, Danville; Dr. J. W. Harvey, San Francisco; Dr. D. Hamilton, Alameda; Dr. W. A. Harvey, San Francisco; Dr. J. W. Hamilton, San Francisco; Dr. O. L. Jones, San Francisco; Dr. M. H. Logan, San Francisco; Dr. N. M. Mason, Lodi; Dr. M. B. Mallory, Auburn; Dr. C. N. Miller, San Francisco; Dr. H. B. Mehrmann, Oakland; Dr. E. H. Mattner, San Francisco; Dr. D. Maclean, San Francisco; Dr. J. C. Stoutt, San Jose; Dr. B. Stetson, Oakland; Dr. G. W. Stoutt, Ukiah; Dr. L. Stone, Oakland; Dr. J. R. Schmitz, San Francisco; Dr. C. J. Sharp, Oakland; Dr. A. S. Tuckler, San Francisco; Dr. E. J. Tucker, Oakland; Dr. J. G. Tomkins, San Francisco; Dr. H. S. Turner, Oakland; Dr. W. Tanner, San Francisco; Dr. M. P. Vary, San Francisco; Dr. M. E. Van Meter, San Francisco; Dr. H. Vandre, San Francisco; Dr. F. V. Wall, Valley Springs.

The application of W. M. Mason, M. D. for membership in the Society was read and accepted. After the report of the secretary of the Board of Examiners, the following papers were presented:

Functional Nervous Diseases in Relation to the Distribution of the Motor Apparatus of the Eyes

F. Cornwall, M. D.

Therapeutic Notes - - H. T. Webster, M. D.

Exophthalmic Goitre - W. M. Mason, M. D.

Gonorrhœa - - W. B. Church, M. D.

External Pressure in Labor - D. Maclean, M. D.

A Talk on Electricity in Diseases of Women G. G. Gere, M. D.

Chlorosis—Case in Practice - W. B. Mallory, M. D.

Various Renal Diseases - - B. Stetson, M. D.

Antiquity of Fashionable Medicine M. H. Logan, M. D.

Paralysis Agitans - H. B. Mehrmann, M. D.

Chronic Ulcers - - M. E. Van Meter, M. D.

The paper of W. M. Mason, M. D., elicited much comment and was highly praised for its originality of thought and logical grasp of the facts in hand. A case in practice was cited. The treatment consisted in the use of veratrum to lower temperature in constantly increasing doses and in the faradic current for the enlarged thyroid. The remedies suggested in the discussion which followed were Lycopus virginica and the hypodermic injection of a tincture of iodine. The noteworthy feature of the treatment was the large and long-continued dosage of veratum.

Professor Church's valuable paper on Gonorrhea provoked a general discussion. For the treatment of the disease every doctor present had his pet prescription. Dr. Webster recommended in acute cases the urethral electrode (positive pole) and in chronic cases injections of thuja and nitrate of silver. Dr. Hamilton's prescription was buchu internally and as an injection hydrastis and hamemelis. Dr. Van Meter would use cocaine to control the discharge and for a quick cure the bichloride solution. Dr. Bixsby

suggested cocaine, morphine and hydrastis as and injection cubebs and hydrastis internally. Dr. Stoutt preferred the salicylate of mercury as an injection, and aconite, camphor, cubebs, salol and the alkalies internally. Dr. Fearn would not inject but preferred to use the salicylate of mercury with the recurrent syringe. Dr. Huckins recommended an aqueous solution of hydrargyrum, pinus canadensis and carbolic acid as an injection and internally aconite, veratrum and pinus canadensis.

Professor Gere followed with an interesting talk on the use of electricity in the diseases of women explaining the nature and uses of the different currents. Farradism should be used where there is a neuralgic tendency. It is sometimes useful in reducing morbid growths. Galvanism effects the most pronounced results. Its action causes the disappearance of inflammatory deposits. It reduces fibroids. The method of application is to place the negative pole to the growth; the positive, consisting of a large plate, being so applied to the person that the current will pass directly through the growth. Strength, ten milliamperes. tion, five to ten minutes. It will prove useful also in chronic endometritis or cervitis. The negative current relaxes, the positive condenses. Alternate them. In menorrhœa, the negative pole to the os will increase the flow; the positive will decrease it. Franklinism will be most serviceable in hysterical patients.

Dr. Mehrmann raised the question of electrocution, Dr. Tuckler that of the advantage to be gained from the bipolar method and the high tension faradic current. Dr. Gere in answering said that the bipolar method offered no great advantage over others in its use but that the high tension faradic current was best when it became necessary to stimulate the peripheral nerves and produce local anæsthesia.

Dr Mary B. Mallory presented to the society an interesting case in practice, of chlorosis. This was followed by an instructive talk by Professor Cornwall on the functional



nervous diseases in relation to the distribution of the motor apparatus of the eyes; and by Professor Maclean on external pressure in labor. Professor Logan entertained the members with a recital of the history of the coal tar products, tracing them through the various geological ages down to the present epoch. The remaining papers on the program were read by title on account of the lack of time.

The officers of the society as elected for the coming year are: President, Dr. Logan; Vice-President, Dr. Turner; 2nd Vice-President, Dr. F. Tucker; Secretary, Dr. Farmer; Corresponding Secretary, Dr. Tanner; Treasurer, Dr. Hunsaker; Board of Censors, Drs. Tomkins, Mason and Farrar; Board of Examiners, Drs. Maclean, Gere, Cornwell, Miller, Scott, Hunsaker, and Logan; alternates, Drs. Wilcox, Tomkins and Vandre. After the reports of the legislative committee, the committee on the Pacific Coast Association, the secretary and treasurer had been given and accepted, the Society adjourned to meet on the third Wednesday and Thursday of November next.

The Reception.

Thursday evening, Nov. 22nd, '94, is memorable for a reception tendered by the Alumni Association of the California Medical College to the class of '94 in B'nai Brith Hall, 121 Eddy St.

The invitation list was an extensive one and as a consequence a large number of Alumni, professors, graduates and their friends were soon assembled to enjoy the sociabilities of the evening. The hall had been handsomely decorated for the occasion with the Alumni colors, and soon was rendered doubly attractive by costumes of such varied hue and delicacy of tint, standing in bold relief before the dark background of full dress suits that it would baffle the skill of an artist to depict the scene.

First on the program was a bewildering grand march to enchanting music in which doctors, young and old, all joined. The balance of the evening was passed in social chat, the whirl of the giddy waltz and other interesting Terpsichorean gyrations. Nor must the refreshments be forgot, neither the punch bowl which added its iota (and an important one) to the general good cheer. When the "wee sma' hours' of morning heralded the time for departure, it was with no small reluctance that the pleasant gathering broke up, feeling that these little diversions from the routine of daily duties are what make life worth living.

'Tis a world of smiles and love, and rife Are the joys of the good gods' giving, And the man is a fool who gibes at life, And great is the cheer of living.

Much credit is due for the statliness of the evening's entertainment to the floor manager, Mr. Chapman, and to Prof. C. N. Miller, Dr. Dora Hamilton and Dr. Carrie L. Cook, the committee who had the arrangements in hand. Opinions freely expressed on every hand are that the reception was a whole cyclone of success.

New Remedies.

TERRALINE IN LA GRIPPE.—J. R. Garber, M. D., of Stanton Ala. writes as follows in the National Medical Review:

I read with unusual interest an article on "Some Experiments with Terraline" in the November number of Food. Showing that your conclusions are correct, and that we have a valuable addition to our therapeutic list, I submit the following case:

Miss ——,a young lady of delicate physique, aged about 20, had a severe visitation of la grippe, in the winter of 1891, from which she apparently recovered only to have a severe recurrence of it the following winter. From the second at-

tack she did not entirely recover, and when in July, 1893, she consulted me, her respiration was rapid and shallow, with an inability for even slight physical exertion; pulse small, quick and frequent, 120; countenance pale; skin cool and clammy; temperature 100; a deeply seated cough, that greatly aggravated a constant, severe pain in the left side; worse at night, often preventing sleep; appetite mostly absent; marked debility and prostration; weight about 84 pounds.

I felt satisfied that my patient had had broncho-pneumonia in her last experience with la grippe, and even at the time of my taking the case her lung was crippled with an effusion of catarrhal products into the lung tissue. As she had taken cod liver oil, iron, quinine, strychnine, etc., without experiencing any relief, I immediately put her on "Terraline", manufactured by the Terraline Company, Washington, D. C.

In a short time she experienced improvement in the appetite, with a gradual amelioration in the cough. Under the continued use of "Terraline", she reported herself in December last as "nearly well." Fearing she might again contract la grippe, I ordered her to Southern Georgia, and to continue the medicine. Recent advices from her report her condition improved beyond the most sanguine expectations; appetite restored; cough entirely gone; sleeps well; weight, 128 pounds; in short, declares herself "perfectly well."

Throughout the treatment only "Terraline" was given, and I would emphasize the fact that improvement speedily began under its use.

ALETRIS CORDIAL.—J. L. Spitzmesser, M. D., Windfall, Ind., says: I was called to see Mrs. W., mother of three children, aged twenty-three years; her weight, when first called to see her, was 73 lbs. She had been treated by eight physicians for muscular rheumatism of a shifting character, invading nearly all parts of her body and limbs, and a leucorrheal discharge that had been a great source of trouble and

annoyance since birth of last child, then seventeen months old, with chronic metritis and left lateral displacement. Patient confined to her bed most of the time, of a nervous, irritable temperament, coughing and expectorating to an alarming extent, and without hope of ever getting well.

I prescribed:

	[10] 하는 사람들은 하는 사람들은 사람들이 되었다면 하는 것이 되었다면 하는 것이 되었다면 하는 것이다.	
R	Celerina	Zviiss
	Tinct. Rhus Tox	gtt- x
	Fl. Ext. Cimicifuga	2ss
M	Sig.—Teaspoonful every three hours.	sillar:
R	Aletris Cordial	z viij
M	SigTeaspoonful alternately with ab	ove.
Local	ly applied:	duling.
R	S. H. Kennedy's Ext. Pinus Canadens	sis

M Sig—Lamb's wool thoroughly saturated, and womb kept in place by impaction of the above.

Patient was received May 16th, and discharged October 26th of the same year, cured, and is now doing her own housework; present weight is now 108 lbs. This case took three bottles of Aletris Cordial. My shelves are never complete without the above remedies in stock. I have got results from them that I have been unable to get from other sources.

Bromidia—Dr. R. Cantalupa, writing from Naples, Italy, under date of July 24th, 1893, says:

Bromidia has produced successful results in all the most varied forms of Insomnia. Among others who have been benefited by its use, is Professor Cesare Olivieri, well known as a most distinguished surgeon in this city, and who, after undergoing tracheotomy for neoplasm in the larynx, suffered terribly from Insomnia, which the usual hypnotics all failed

to relieve. Hearing of this from a mutual friend, I advised the use of Bromidia, which promptly produced the desired result.

Antikamnia—The following is a pronounced opinion from the veteran editor of the Memphis Medical Monthly:

October 22, 1894.

Gentlemen:—Your kind favor of 20th inst., received this evening, on my return from Ship Island, Miss.

The "Antikamnia and Codeine Tablets" which reached me also, were exactly what I wanted. Having been exposed to the Gulf breeze all day, I returned suffering intensely with gastralgia and pleurodynia. One of the tablets gave me relief, and I have since had my supper and feel quite comfortable.

In the fact that your preparation Antikamnia, has no depressing effect upon the cardiac force, you have much for congratulation, and the field for its usefulness may be viewd like the horizon— the nearer you approach it, the wider its recognized extent.

Yours cordially, F. L. SIM, M. D.

Bureau of Information.

The State Medical Society has opened a "Bureau of Information" regarding locations desirable for physicians and surgeons. Any one knowing of good ocations, or desiring to sell locations, or wishing competent assistants, should communicate with the secretary

Any advertised location in this Journal that has been filled, please notify the secretary, that its publication may be withdrawn

The following locations have been sent in for publication:

COTTONWOOD, SHASTA Co.—It has been reported to this "Bureau" that there is an excellent opening for an Eclectic at the above town.

KNIGHTS FERRY—Twelve miles from Oakdale. No Eclectic in place. Good opening.

SAN FRANCISCO—Two thousand dollars will buy books and instruments worth \$1,000, furniture worth \$1,500, and the good-will of a good paying practice in the city of an Francisco. Office rent free. Reason for selling, ill health. Address, "Doctor," California Journal Co., 1420 Folsom st., San Francisco.

FOR SALE, or rent; my home and horse. Only physician and druggist in town. Nearest doctor fifteen miles away. Good R. R. prospects. Will sell everything. Good place for the right man with some money. Address "Physician and Druggist." Bieber Lassen Co. Cal.

BEST LOCATION in the state for a physician with some money. For particulars enquire of Calif. Drug Co. 1420 Folsom St. S.F.

Wanted-A position as substitute, or assistant to a busy general

practitioner, or eye and ear specialist. Would accept position in a drug store. Good references. Address: National Medical Exchange, Eckhardt, Indiana.

A good opening in Inyo county. Present physician leaving on account of ill health and advancing years. Apply to John Fearn, M. D., P. O. Bok. No. 1, Oakland, Cal.

FOR SALE—in the country a Doctors location, consisting of a store and small stock of drugs, a new house with grounds, a horse, buggy, cart and a practice of from \$2500 to \$3000 a year. For particulars enquire of this JOURNAL.

For Sale—or to exchange for a home in the country, a city drug store, stock valued at \$1,200, and practice connected with the same, embracing position as Lodge physician to Foresters with drug contract for lodge. Also Physician to Society of the World, a splendid new order. Address, Physician and Druggist, 1401 Church St. San Francisco.

A student (married) desires employment outside of lecture hours. Is an experienced accountant, and all-around business man. Is willing to be generally useful. Can furnish A. No. 1 references.

Address, H. T., 1828 Eagle Avenue, Alameda, Cal.

At santa Paula, California, there is at present no Eclectic, and the place will furnish an excellent opening.

Also two good locations in the country for active workers.
All letters addressed to the secretary of the "Bureau of
Information of Locations" will be answered promptly

J. C. FARMER, M. D., Sec'y, 921 Larkin St.

San Francisco.

Locations for Eclectics.

Cincinnati, O., April 23rd, 1894

Editor, California Medical Journal,

Dear Sir:—Pursuant to the request of Alexander Wilder, M. D., Secretary of the National, I enclose you for publication, all of the locations for Eclectic Physicians, which I have received up to the 20th.

Respectfully,

J. K. SCUDDER.

A good town of 3,500 in Kentucky. A middle aged, high-potency Eclectic or low-potency Homœopath preferred. Address with stamp Jas. A. Young, M. D., Hopkinsville, Ky.

Denver, Col. Good office. Address Dr. E. M. McPheron, 2103 Larmier st.

Perin, Ill. Address A. H. Hatton.

Springfield, Neb. Address L. A. Bates.

Stafford, Conn. Adress E. M. Douley, M. D., Montville, Conn.

Barry, Pike County, Ill. 2,000 inhabitants. Eclectic just died. Address with stamp, L. A. Coley, Pittsfield, Ill.

Manistique, Mich. 4,000 inhabitants; 6 churches, good schools and roads. Good opening for surgery. Address Dr. O. C. Bowen.

Hartford, Conn. Owing to the death of Dr. H. J. Wiers, there is a good opening for an active Eclectic. Address Mrs. Dr. H. J. Weirs.

Warren, Ind. 2,000 inhabitants. surrounded by a fine farming country. An Eclectic will do well here. Address Sylvanus Finkle, Warren, Ind.

Mlian, Ind. Good town, fair country; 42 miles from Cincinnati. No opposition. Address George E. Parsons, M. D., Delaware, Ind.

A good location for an expert operator. Must be an Eclectic, and fully up to the most modern ideas in the treatment of the eye and ear. Address W. F. Curryer, M. D., 32 Massachusetts ave., Indianapolis, Ind.

LOCATIONS IN WASHINGTON. Address W. M. Smith, M. D., Montesano,

Olympia, capital of State; population 5,000 or 6,000.

Seattle, on Puget Sound; the largest and most flourishing town in the State.

Roquiam; on Gray's Harbor; population 800. No Eclectic. Montesano (county seat), Chihalis Co.; population 1,000.

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*CALIFORNIA*MEDICAL* JOURNAL.*

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D. MACLEAN, M. D., M. E. VAN METER, M. D., C. N. MILLER, M. D., EDITORS.

Terms: \$1.50 per annum, In Advance.

The Editors disclaim any responsibility for the statements or opinions of contributors.

Expression is essential to growth. We cordially invite all Eclectic physicians who would keep abreast with the times to make frequent use of our columns.

To insure accuracy, employ the typewriter when possible. Otherwise prepare manuscript with care, re-writing when necessary; be kindly thoughtful of the Editor and compositor, and do your own drudgery—time is money.

This JOURNAL will be issued on the first day of the month.

Let all communications be addressed, and money orders made payable to the CALIFORNIA MEDICAL JOURNAL, 1422 Folsom Street, San Francisco, California.

Editorial.

Our Journal.

With this issue, Our Journal for eighteen hundred and ninety-four will be ready for the binder. It will make a volume of which our physicians may well be proud. Improvements over former volumes will, in several particulars,

be readily apparent. It will be larger by fully one-sixth than any other; in presswork and quality of paper it will show improvement; several illustrations will be found; and in the entire year's work no selections appear, with the single exception of the article on Latin printed by special request from the late Dr. Howe's writings.

When it is remembered that this has been a year of universal depression, that scarcely an individual on the Coast has escaped the pinch and worry of hard times, Our Journal's advance will appear all the more satisfactory.

Now what of the future? It is expected by the management that during the coming year, we shall have less of hard times, that our advertising and subscription departments will do a a greatly increased amount of business. If this hope be realized our readers shall receive the benefit.

It takes money, hard cash, and lots of it to make a firstclass journal. Good work can only be done with gold pens. May we ask our subscribers to bear this in mind?

We hope to make Our Journal for ninety-five still larger, and to give a greater number of our physicians a chance to record their experiences. Let us hear from all. Give us especially your surgical experience. We must develope more surgeons. Let there be more study in this direction, more thorough preparation, fewer mistakes in diagnosis, more scientific and skillful work, and a more general desire to go on record in the columns of Our Journal. Do not wait to report capital operations only, we want to know everything that you do.

Not only in surgery but in medicine as well do we want to see great advancement and much writing. Other schools are making constant and wonderful improvement in the discovery and preparation of remedies, and in their methods of practice. We shall have to scramble or fall behind. It will not do to stop striving, and chuckle over what eclecticism has done. The world has absorbed that, and its catechism for eclectics consists of but two questions: "What

are you now doing? What are you going to do?"

Our Journal is waiting to publish some good, rousing answers.

M.

Alumni.

The Alumni of the California Medical College are the hope of Eclecticism on this coast. In numbers, intelligence and training we are abundantly strong to make our cause triumphant. What we lack is public spirt and organization. We are lukewarm, and each is struggling single-handed.

Individual effort is good, but is only effective as a supplement to vigorous, well-directed combined action.

If the hundred and fifty graduates of our college could be united in desire and effort, if we had a strong bank account, if we had a central home of even one reading-room, and a circulating library of the newest books, if we had a committee of instruction to teach members the tetails of new methods, if we had an advisory committee on education to exchange ideas with our college faculty, if we had a committee on publication to consult with the editors of Our Journal, if we could meet in social concourse every year, if in short we could be imbued with the public spirit, wisdom and foresight that would enable us to make effective our united strength, Eclecticism would soon become, on this coast the best known and most popular of all the schools.

Let us see if we cannot become better acquainted during next year, to the end of forming a more vigorous organization. Let us have an Alumni column in Our Journal to which each graduate may contribute a five-line message every month or two. Send on the messages and the Alumni column will be started in the January issue. M.

We have received the California Medical Journal and find it brim full of good things. It is ably edited and is a good exponent of Eclecticism on the Pacific coast. Our

eastern readers will do well to send for it and see the vim of California Eclectics.—Eclectic Journal and Family Adviser, Carthage, Mo.

State Meeting.

The State meeting is past history, but what of the results? Once a year we come together from the various parts of the State for mutual improvement, to tell one another of our successes and failures and by this interchange of ideas, to better qualify ourselves to cope at the bedside with disease. None can afford to miss these meetings. The attendance from the country this year was good, still it might have been better.

Next year, may we see double the number present. The time of the College term having been changed, there will be no confliction between Commencement Exercises and State meeting. This is as it should be. As was expressed by several members at the recent meeting, the prime object of our Society is the mutual improvement of its members. Sociability is all right in its place, but members are not going to travel several hundred miles merely to have a good time. At Commencement, the College Professors are busy with arrangements incidental to graduation. Many of them are on committees of entertainment, etc., so that it is almost impossible for them to attend to their duties as members of the State Society.

The past meeting was certainly a very profitable one to all concerned, but let us come next year prepared to make it doubly so.

Four Years.

Let it be borne in mind that with the opening of the next course of lectures at the California Medical College, on the second Monday in January, the four years' course will be inaugurated.

This will enable students to devote three years to thoroughly master the theory of the science of the various chairs and will leave one whole year to be devoted to the practical application of their knowledge. The last year will doubtless be entirely devoted to clinical practice and laboratory and bacteriological work.

Mental Discipline.

A course of study at a Medical College, as usually pursued, does not give good results as a means of mental discipline and general culture.

The fault is in the methods of teaching. Mental growth, like muscular growth, comes from within, not from without. It is never secured save as a reward for actual labor, patient, thoughtful, independent drudging. Now, medical students never drudge, there is no opportunity given them for that. Medical students never think, there is no time allowed for thinking. Medical students never write; they may complete the course without writing a word save at the end, when they are expected to copy a so-called "thesis" from some medical work.

Instruction is by means of lectures. The student does not evolve ideas, he only receives them. He does not solve difficult problems and prove his own deductions, the knowledge he gains is imparted to him, and is not to be questioned. The Professor is active, but the student is simply passive. The Professor is in earnest, but the student is listless. The Professor works, but the student yawns.

As a natural, inevitable result of this faulty method, the student is not imbued with a desire to attain to a full degree of culture, to make the most possible of himself, his only thought is for the end to come. The only prize he covets is his sheepskin—a leather medal.

M.

The Legislature.

The Legislature will soon be in session and wrestling with the problems of the day. Undoubtedly the ultra-regular will appear as usual on the floor and in the lobby, with a "bill," a sort of a duck's bill, to suppress the dreadful Eclectic, and the terrible Homoeopath.

Impotent and unwilling to come before the people on their own merits, they will quack themselves hoarse to gain legal support. Self appointed guardians of the public weal, they would protect the dear people—as hawks protect chickens or wolves, sheep. Standing with both hands in the people's pockets, they will sight enemies from afar, and will dolefully intone that,

"The only way the wicked to confound And corruption to prevent,
Is for the righteous to arise
And gobble every cent."

М.

A Suggestion

The unfairness of the public hospitals being exclusively in the hands of the dominant school, is fully recognized by the people at large. The following suggestion is worthy of consideration: Let each medical student, independent of schools, pay a hospital fee and be provided with tickets entitling him, on certain days of the week, to hospital privileges. Then, let the Governor of the State appoint, irrespective of schools, compe ent men to assume charge of the several departments, on specified days, at whose demonstrations all students who have paid the fee are privileged to attend. Why not?

"All my life, looking back on it, is like a broken stair, that winds 'round a ruined tower but never will lead anywhere."

BOOK NOTES.

TEXT BOOK OF HYGIENE. A comprehensive treatise on the Principles and Practice of Preventive Medicine from an American stand-point. By George H. Rohe M. D., Professor of Therapeutics, Hygiene, and Mental Diseases in the College of Physicians and Surgeons Baltimore; Superintendent of the Maryland Hospital for the Insane; Member of the American Public Health Association; Foreign Associate of the Societe Francaise d'Hygiene, etc. Third Edition, thoroughly revised and largely re-written, with many illustrations and valuable tables. Royal Octavo, 533 pages. Cloth, \$3.00 net. F. A. Davis Co., Publishers, 1914 1916 Cherry street.

In this book, the student, practitioner and teacher will find a most trustworthy guide to the principles and practice of Prentive Medicine. A feature that will commend itself favorably to teachers of hygiene, is the addition of an analytical set of questions appended to each chapter. A separate section has also been added on the methods of examination of the air, water and food.

PRACTICAL URINALYSIS AND URINARY DIAGNOSIS.

A Manual for the use of Physicians, Surgeons and Students. By Charles W. Purdy, M. D., Queen's University; Fellow of the Royal College of Physicians and Surgeons, Kingston; Professor of Urinology and Urinary Diagnosis at the Chicago Post-Graduate Medical School. Author of "Bright's Disease and Allied Affections of the Kidneys;" also of "Diabetes: Its Causes, Symptoms and Treatment." With numerous illustrations, including Photo-Engravings and Colored Plates. In one Crown Octavo volume, 360 pages, in Extra Cloth, \$2.50 net. F. A. Davis Co., Publishers, 1914 and 1916 Cherry street.

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DISEASES OF THE CHEST, THROAT AND NASAL Cavities. By E. Fletcher Ingalls, A. M., M. D., Professor of Laryngology and Practice of Medicine, Rush Medical College etc., etc. Third Edition, revised. Wm. Wood & Co., Publishers, New York.

This work, presents in convenient form, the known facts relating to diseases of the respiratory, throat and circulatory organs, including physical diagnosis and diseases of the lungs, heart and aorta, laryngology and diseases of the larynx, nose, thyroid gland and oesophagus. It is amply illustrated, (240 illustrations) and, though not intended to be encyclopædic in nature, contains a fund of information within its covers, that will make it a valuable text and work of reference to both student and practitioner.

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This work has been undertaken after several years of experience by the Author as Instructor on the subject of Medicine, his purpose being to prepare and present to the profession, a brief synopsis of the subject, not with the view of replacing the expensive and elaborate publications, but to give to the busy practitioner and student at a small cost, concise and accurate descriptions which will suggest outlines and practical thoughts upon etiology, symptomology, pathology, diagnosis, prognosis and treatment.

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